

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| | | | | |
|--|--------------------|---|--|--|
| 1. NAME OF COMMITTEE IN FULL Doug Jones for Senate Committee | | | | |
| ADDRESS (number and street) PO Box 131025 | | | | |
| CITY Birmingham | STATE AL | ZIP CODE 35213 | | |
| 2. NAME OF CANDIDATE Jones, Doug, , , | | 3. OFFICE SOUGHT (State and District) Senate AL | | 4. FEC IDENTIFICATION NUMBER C00640623 |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ | | | | |

| | | | | | |
|--|--------------------|-------------------------------|-------------------------------------|---------------------------------------|--|
| A. FULL NAME Cockrell, Findlay, , , | | | Name of Employer N/A | Date (month, day, year) 10/27/2020 | Amount 1000.00 |
| MAILING ADDRESS 40 Autumn Dr Apt 190 | | | Transaction ID : VTQYMWWPCC1 | | |
| CITY Slingerlands | STATE NY | ZIP CODE 12159-9394 | Occupation Not Employed | | |
| B. FULL NAME Cockrell, Findlay, , , | | | Name of Employer N/A | Date (month, day, year) 10/27/2020 | Amount 1000.00 |
| MAILING ADDRESS 40 Autumn Dr Apt 190 | | | Transaction ID : VTQYMWWPCD9 | | |
| CITY Slingerlands | STATE NY | ZIP CODE 12159-9394 | Occupation Not Employed | | |
| C. FULL NAME Doyle, Edward, , , | | | Name of Employer Self Employed | Date (month, day, year) 10/27/2020 | Amount 1000.00 |
| MAILING ADDRESS 1501 Front St Unit 601 | | | Transaction ID : VTQYMWWPCQ8 | | |
| CITY San Diego | STATE CA | ZIP CODE 92101-2979 | Occupation Consulting Physician | | |
| D. FULL NAME Ferron, Mark, , , | | | Name of Employer N/A | Date (month, day, year) 10/27/2020 | Amount 1800.00 |
| MAILING ADDRESS 216 Corte Madera Ave | | | Transaction ID : VTQYMWSMTN0 | | |
| CITY Mill Valley | STATE CA | ZIP CODE 94941-4502 | Occupation Retired | | |
| E. FULL NAME Ferron, Tracy, , , | | | Name of Employer N/A | Date (month, day, year) 10/27/2020 | Amount 1800.00 |
| MAILING ADDRESS 216 Corte Madera Ave | | | Transaction ID : VTQYMWSMTH8 | | |
| CITY Mill Valley | STATE CA | ZIP CODE 94941-4502 | Occupation Artist | | |
| SIGNATURE (optional) Turner, James, Douglas, , Jr. | | | DATE 10/29/2020 | | For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100 |
| <i>[Electronically Filed]</i> | | | | | |

| | | |
|--|--|--|
| | | |
|--|--|--|

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6
(Revised 03/2016)

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| | | | |
|--|--|---|--|
| 1. NAME OF COMMITTEE IN FULL Doug Jones for Senate Committee | | | |
| ADDRESS (number and street) PO Box 131025 | | | |
| CITY, STATE, and ZIP CODE Birmingham AL 35213 | | | |
| 2. NAME OF CANDIDATE Jones, Doug, , , | | 3. OFFICE SOUGHT (State and District) Senate AL | |
| 4. FEC IDENTIFICATION NUMBER C00640623 | | <i>continuation page</i> | |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ | | | |

| A. FULL NAME, MAILING ADDRESS AND ZIP CODE | Name of Employer | Date (month, day, year) | Amount |
|--|---|-------------------------|---------|
| Giles, Ted, W, , 3769 Montevallo Rd S Birmingham AL 35213-4222 | Chester's International Transaction ID : VTQYMWWPK28 Occupation CEO | 10/27/2020 | 2800.00 |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE Hall, Timothy, , , 1015 Manning Ave Los Angeles CA 90024-3220 | Name of Employer UCLA Transaction ID : VTQYMWWPAT6 Occupation Psychiatrist | 10/27/2020 | 1800.00 |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE Lang, David, , , 319 Riverside St Portsmouth RI 02871-4800 | Name of Employer Lang Pharma Nutrition Transaction ID : VTQYMWWPAH8 Occupation Businessman | 10/27/2020 | 2800.00 |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE 3720 159Th Ave NE Building 34, Room 4677 Redmond WA 98052-6306 | Name of Employer Self Employed Transaction ID : VTQYMWV2N32 Occupation | 10/27/2020 | 1000.00 |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE Nino, Deanna, , , 2221 Via Anita La Jolla CA 92037-6903 | Name of Employer Self Employed Transaction ID : VTQYMWVPC98 Occupation Attorney | 10/27/2020 | 2800.00 |

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| | | | |
|--|--|---|--|
| 1. NAME OF COMMITTEE IN FULL Doug Jones for Senate Committee | | | |
| ADDRESS (number and street) PO Box 131025 | | | |
| CITY, STATE, and ZIP CODE Birmingham AL 35213 | | | |
| 2. NAME OF CANDIDATE Jones, Doug, , , | | 3. OFFICE SOUGHT (State and District) Senate AL | |
| 4. FEC IDENTIFICATION NUMBER C00640623 | | <i>continuation page</i> | |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ | | | |

| | | | |
|--|--|---|-----------------------|
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE O'Donnell, Dawn, , , 5651 Clouds Mill Dr Alexandria VA 22310-1158 | Name of Employer Self Employed Transaction ID : VTQYMWWPKD5 Occupation Lobbyist | Date (month, day, year) 10/27/2020 | Amount 1000.00 |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE Rachel, Lauren, , , 4462 Suzanne Cir Mobile AL 36608-2240 | Name of Employer Beautycounter Transaction ID : VTQYMWWP9Y8 Occupation Consultant | Date (month, day, year) 10/27/2020 | Amount 1000.00 |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE Schuler, Mary, , , 315 N Euclid Ave Oak Park IL 60302-2109 | Name of Employer N/A Transaction ID : VTQYMWWPCA6 Occupation Not Employed | Date (month, day, year) 10/27/2020 | Amount 2800.00 |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE Seydel, Laura, , , 348 Manor Ridge Dr NW Atlanta GA 30305-3508 | Name of Employer CPF Transaction ID : VTQYMWSMTD7 Occupation Chairperson | Date (month, day, year) 10/27/2020 | Amount 1000.00 |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE Varet, Elizabeth, R, , 1140 5Th Ave New York NY 10128-0806 | Name of Employer Self Employed Transaction ID : VTQYMWWPDE0 Occupation Investor | Date (month, day, year) 10/27/2020 | Amount 1500.00 |

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| | | | |
|--|--|--|--|
| 1. NAME OF COMMITTEE IN FULL Doug Jones for Senate Committee | | | |
| ADDRESS (number and street) PO Box 131025 | | | |
| CITY, STATE, and ZIP CODE Birmingham AL 35213 | | | |
| 2. NAME OF CANDIDATE Jones, Doug, , , | | 3. OFFICE SOUGHT (State and District) Senate AL | |
| 4. FEC IDENTIFICATION NUMBER C00640623 | | <i>continuation page</i> | |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ | | | |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE Wainwright, Candace, , , 1112 Park Ave Apt 16B New York NY 10128-1235 | | | |
| Name of Employer N/A | | Date (month, day, year) 10/27/2020 | |
| Amount 1000.00 | | Transaction ID : VTQYMWWPB3 Occupation Not Employed | |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE | | | |
| Name of Employer | | Date (month, day, year) | |
| Amount | | Occupation | |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE | | Name of Employer | |
| Date (month, day, year) | | Amount | |
| Occupation | | D. FULL NAME, MAILING ADDRESS AND ZIP CODE | |
| Name of Employer | | Date (month, day, year) | |
| Amount | | Occupation | |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE | | Name of Employer | |
| Date (month, day, year) | | Amount | |
| Occupation | | | |